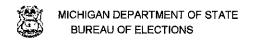


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement cove	ers From: 08/27/12 to	10/21/12
1. Committee I.D. Number	4. Candidate Last Na		
0136802	Meltzer	Kimberly	D
	4a. Office Sought Inclu	uding District # or Community Serve	ed (If applicable)
2. Committee Name	Clinton Tv	vo Clerk	
CTE Kim Meltzer		•	
5. Committee's Mailing Address	4b. County of Residence		
20585 Leelanau Trail	6. Treasurer's Name &	k Residentiai Address	To N
Clinton Twp., MI 48038	Kim Meltzer 20585 Leelana	T.a.!	2 0C PCC PCC PCC PCC PCC PCC PCC PCC PCC
	Clinton Twp., M	/11 40030	is 8 n
Aréa Code and Phone (586) 709-1321			rii, <u> </u>
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may			
be sent to this address by the filing official.	Area Code & Phone	(586) 709-1321	
7. Treasurer's Business Address	8. Designated Record	d keeper's Name and Mailing Addre	ess (If the committee has a
	Designated Record Re	seper)	uw şmş
	1		
Area Code and Phone	Area Code and Phone	e	
9. TYPE OF STATEMENT		· · · · · · · · · · · · · · · · · · ·	
		□a	0 1
9a. ✓ Pre-Election OR 9b. Pos	t-Election ^{9c.}	Annual Statement (Coverage Year)
	9d. l	Amendment to Campaign Sta	tement (Complete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:		or 9e to indicate which Statem	nent is being amended)
	9e.	Dissolution of Candidate Com	ımittee
Primary Ge	neral		
Convention	nool	Effective Date of D	Dissolution
Special	cus	checking this item, I/We certify that	t the committee has no assets or
	outs	standing debts, including late filing	fees. Further, I/We request that if
Date of Election, Convention or Caucus		dissolution cannot be granted, that Reporting Waiver.	this be considered a request for
11/06/12	Note	te: The disposition of residual funds	s must be reported on Schedule
A committee that does not have a Departing Maiver must file all		and the Summary Page.	
A committee that does not have a Reporting Waiver must file all r Schedules. Direct contributions, in-kind contributions, loans, expe	nditures, and outstanding	ng debts count against the \$1,000 F	Reporting Waiver threshold.
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany before the filing deadline of a required campaign statement,	ed since the information his Campaign Statement	i was snown on the committee's St it. If a request for a Reporting W	atement of Organization, an aiver is not received on or
10. Verification: I/We certify that all reasonable diligence was used	·		
my\our knowledge and belief the contents are true, accurate and c	omplete.	, statement and attached solication	o (ii airy) and to the best of
Current Treasurer or	-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 1 2 2 - 1	10/28/2012
Designated Record keeper Type or Print Name	1 Signatura	1 Met 12EL Dat	10/26/2012
Type of Plint Name	Signature		
Candidate KIM MELTIER	, 9 9	olten	10/26/2012
Type or Print Name	Signature	Dat Dat	.e

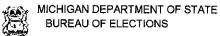


1. Committee I.D. Number 0136802

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE Kim Meltzer

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 7,200.00	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$7,200.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$47.79	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$35.80	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$9,899.39	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$9,899.39	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.)	(24.) Ф
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(124), 0	
p. Gwed to the committee (constant)	(12b.) \$BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$_\$4,461.50	
Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$7,200.00 (15.) = \$ \$11,661.50	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$\psi \cdot \c	
16. Amount expended during reporting period (Add lines 9 and 11)		
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$1,762.11	

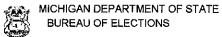


CANDIDATE COMMITTEE

1. Committee I.D. Number _______0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.			er last name, first name, e or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of Rec	ceipt .	10/01/12		
Gallagher, Anne 32833 N. River Rd. Harrison Twp., MI 48045					_s 100.00	_s 100.00	
5. If over \$100.00 cumulative, please provide:				¥	<u> </u>		
			Employer			Click Here fo	or Memo Itemization
Business Address							:
	✓ Direct		Loan from a person	F	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Reco	ceipt	10/02/12		
George, James 19634 Westches Clinton Twp., MI						_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cum	ulative, please pro	vide	: :			Click Here fo	r Memo Itemization
Occupation Develope	er	Er	nployer_Self				
Business Address 85	N. Main Mt. Cle	me	ns MI 48043				
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Rec	ceipt -	10/03/12		
Wagner, Dale 29480 24 Mile R Chesterfield Twy	•					<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cum	ulative, please pro	vide	e:			Click Here for	Memo Itemization
Occupation			mployer				
Business Address	-			<u>,</u> .			
Type of Contribution:		Ų	Loan from a person		Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	L.	YES 4. Date of Red	eceipt	10/05/12		
Sorrentino, Ange 47111 Mallard D Shelby Twp., MI	r. 48315-5002					§ 100.00	_{\$} _100.00
5. If over \$100.00 cum	ulative, please pro	VIG	:			Click Here for	Memo Itemization
Occupation		-	Employer				
Business Address							
Type of Contribution:	Direct	Ĺ.,	Loan from a person	F	Fund Raiser		
					Page Subtotal	වරව.ග	
					Total of All Schedules 1A		
Page of			(Com	ipicie	e on last page of Schedule) ।	Enter this total on line 3a of Summary Page.	•

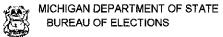


CANDIDATE COMMITTEE

1. Committee I.D. Number ______0136802

CTE Kim Meltzer 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report <u>all</u> contributions regardless of amount.					6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of	of Rece	ipt 10/04/12		
Tunison, James						
3353 St. Clair Shor					_s 100.00	ູ 100.00
East China, MI 48					\$_100.00	\$ 100100
5. If over \$100.00 cumula	tive, please prov	ride:			Click Here fo	or Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser	·	
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	of Recei	pt 10/11/12		
Meltzer, Kim					1000.00	2400.00
20585 Leelanau Ti					_{\$} 1000.00	_{\$} 2100.00
Clinton Twp., MI 4						
5. If over \$100.00 cumulat			d Mad	hining LLC	Click Here fo	r Memo Itemization
Occupation Business A						
Business Address 101 S	hafer Romeo	MI 48065				
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date	of Rece	eipt 10/17/12		
10th Congressiona	ıl District Re	publican Commi	ittee		_s 200.00	200.00
48653 Van Dyke A					\$ 200.00	_{\$} 200.00
Shelby Twp., MI 4					Click Here for	Memo Itemization
5. If over \$100.00 cumular	tive, please prov	ide:				
Occupation		Employer				
Business Address 13651				7		
V.	Direct	Loan from a person		Fund Raiser	**************************************	
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	of Rec	eipt 10/18/12		
Nickerson, Michael	-				400.00	000.00
43431 Salt Creek	กวอ				_{\$} 100.00	_{\$} 200.00
Clinton Twp., MI 48 5. If over \$100.00 cumula		ide:				
	aro, piedeo pro				Click Here for	Memo Itemization
Occupation	· · · · · · · · · · · · · · · · · · ·	Employer				
Business Address				· · · · · · · · · · · · · · · · · · ·		
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
				Page Subtotal	\$1,4 00.00	
			Gr	and Total of All Schedules 1A		
			(Comp	olete on last page of Schedule)	Enter this total on	J
Page of					line 3a of Summary Page.	

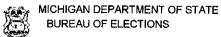


CANDIDATE COMMITTEE

1. Committee I.D. Number ______0136802

2. Committee Name	CTE Kim Meltzer	
2. Committee Harrie		-

Enter contributor's name and address. If contr middle initial. Check box to indicate if contribu Committee (PAC) Report <u>all</u> contributions rega		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution #1 PAC Receipt?	YES 4. Date of Recei	pt 09/17/12		
Name & Address: Graham, Mark				
16328 Vandelay Dr			250.00	250.00
Macomb, MI 48044			_{\$} 250.00	\$_Z30.00
5. If over \$100.00 cumulative, please provide			Click Here fo	r Memo Itemization
Occupation salesman	Employer Detroit Lions (Club	Ollow Here to	i Weino Reimzadon
Business Address Detroit MI				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt?	YES 4. Date of Recei	pt 10/10/12		
Nicolella, Frank 37548 Hidden Valley Ct.			_{\$} _200.00	_{\$} 200.00
Clinton Twp., MI 48036				
5. If over \$100.00 cumulative, please provide			Click Here for	r Memo Itemization
Occupation owner Er	mployer Nino Salvaggios	•		
Business Address 17496 Hall Rd Clinton	Twp., MI 48038			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt?	YES 4. Date of Rece	ipt 10/12/12		
Kleeman Trust, Eugene			_s 100.00	400.00
43164 W. Kirkwood Dr.			\$ 100.00	_s 100.00
Clinton Twp., MI 48038			Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide	9:		Onor Horo for	WONO ROMERUON
Occupation	Employer			
Business Address				·
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Reco	eipt 10/18/12		i
Abbate, Dominic				
2500 Royal View Dr.			_{\$} 50.00	_s 250.00
Oakland, MI 48363				¥ <u>,</u>
5. If over \$100.00 cumulative, please provide	e:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
		Page Subtotal	\$600.00	
	Gr	and Total of All Schedules 1A	<u> </u>	
		plete on last page of Schedule)	Enter this total on	J
Page <u>3</u> of			line 3a of Summary Page.	

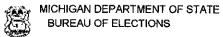


CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136802

2. Committee Name	CTE Kim Meltzer	

Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.					6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address;	PAC Receipt?	YES 4. Date of	Rece	pt 10/01/12		
Lotito, Michael 22525 Hall Rd S Macomb MI 480 5. If over \$100.00 cum)42	wide:			_{\$} 100.00	_{\$} 100.00
	man of places pro				Click Here f	or Memo Itemization
Business Address	√ Direct	Loan from a person	Ĺ	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	Recei	pt 09/22/12		
Sumner, Marlin 41210 Fox Run Clinton Twp., MI					_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here fo	or Memo Itemization
Occupation	a,	Employer				
Business Address			·····			
Type of Contribution:	✓ Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of	Rece	^{ipt} 09/25/12		
Ruggirello, Peter 18987 Riverway Clinton Twp., MI	Ct.				_{\$} 75.00	_{\$} 75.00
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		Employer		···········		
Business Address	715					
Type of Contribution:		Loan from a person		Fund Raiser	···	
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	f Rece	eipt <u>09/15/12</u>		
Ciaramitaro, Jos 38954 Santa Bar Clinton Twp., MI	rbara St.				_{\$} 100.00	_{\$} _100.00
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	r Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	✓ Direct	Loan from a person		Fund Raiser		
		(Page Subtotal and Total of All Schedules 1A lete on last page of Schedule)	\$300.00 Enter this total on	
Page of					line 3a of Summary Page.	



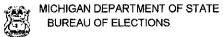
CANDIDATE COMMITTEE

1. Committee I.D. Number

0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/21/12 Name & Address: Udicki, Maria 1910 Flagstone Cir Rochester, MI 48307	_{\$} 800.00	_{\$} 900.00
5. If over \$100.00 cumulative, please provide:	Oliale Uses fo	N.A 14 1
Occupation Administrator Employer Warren Industries	Click Here to	or Memo Itemization
Business Address 22805 Interstate Clinton Twp., MI 48035		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/19/12 Name & Address		
Udicki, Doug 1217 Creekview Dr. Rochester, MI 48307	\$ 1000.00	_{\$} 1000.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Owner Employer Warren Industries		
Business Address 22805 Interstate Clinton Twp., MI 48035		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/11/12 Name & Address:		
Smarsh, Steven PO Box 46965 Mt. Clemens, MI 48046	§ 1000.00	_{\$} 1000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation CEO Employer Tru Tech Systems		
Business Address 24550 N. River Rd. Mt. Clemens Mt 48043		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/15/12 Name & Address		
Carik, John 77 Vistaview Ct. Rochester Hills, MI 48306	§ 300.00	_{\$} _300.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation owner Employer Carik Marketing Group LLC		
Business Address 17610 East Kirkwood Dr. Clinton Twp., MI 48038		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$3,100.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ______0136802

2. Committee Name CTE Kim Meltzer

line 3a of Summary

Page.

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 09/19/12		
Andary, Kathleen		
19011 Martin Dr.	250.00	<u>,</u> 250.00
Clinton Twp., MI 48038	_{\$} 250.00	_{\$} 230.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation legal assistant Employer Towner & Towner	Click Here it	n Memo Remization
Business Address 38770 Garfield Rd Ste 100 Clinton Twp., MI 48036		
Type of Contribution: Violect Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/11/12 Name & Address		
Ballenberger, Emily 1313 Yorktown St	_{\$} 250.00	_{\$} 250.00
Grosse Pointe Woods, MI 48236		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation attorney Employer Plunkett Cooney		
Business Address 10 S. Main Ste 400 Mt. Clemens MI 48043		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/18/12 Name & Address:		
Uhlig, Kathy 51844 Johns Dr	_{\$} 250.00	_{\$} 250.00
Chesterfield MI 48047	Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide:	Olick Fictor	Wichio Romization
Occupation housewife Employer		
Business Address		
Type of Contribution:	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/18/12 Name & Address		
Yore Jr., James 21940 Wendell St.	_{\$} 250.00	_{\$} 250.00
Clinton Twp., MI 48036	*	Ψ
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation auto worker Employer Chrysler		
Business Address 38111 Van Dyke Avenue Sterling Heights MI 48316		
Type of Contribution:		<u>.</u>
Page Subtotal	\$1,000.00	
Grand Total of All Schedules 1A	7200.00	
(Complete on last page of Schedule)	Enter this total on	_

Page 6 of _____



ITEMIZED IN-KIND CONTRIBUTIONS

CAN	IDIDA	TE	COMMI	TTE

HEMIZED IN-KIND CONT	MIDUTIONS						
SCHEDULE 1-II							
CANDIDATE COMM	AITTEE 2. Committee Name CTE Kim Meltzer						
Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box) Date of Receipt Name & Address of Vendor from whom goods or services were purchased	Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)				
Contribution # 1 PAC Receipt? Yes Name & Address: RTL of Michigan 2340 Porter St PO box 901 Grand Rapids, MI 49509 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description list rental Date Of Receipt: 10/17/12 Vendor Name & Address:	47.79 \$	ization				
Fund Raiser Contribution							
Contribution # 2 PAC Receipt? Yes Name & Address Clarence Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038	4.	15.90 s_					
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description website 5. Date Of Receipt: 09/21/12 6. Vendor Name & Address:						
Fund Raiser Contribution	Plimus, Inc. 49106 Milmont Freemont CA 94538	ck Here for Memo Itemi	ization				
Contribution #3 PAC Receipt? Yes Name & Address: Clarence Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	\$ck Here for Memo Itemi	ization				
	Page Subtotal	\$83.59					
	Grand Total of all Schedules 1-ik (Complete on last page of Schedule)		v				

on line 6 of Summary Page

Page _____ of ____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

2. C	ommittee Name CTE Kim Meltzer			
	4. Purpose (Required Information)		5. Date	6. Amount
	Purpose: website	_	09/21/12 Date	s <u>15.90</u>
		Click H	lere for Memo i	Itemization Type
	Check box if this expenditure is payn debt or obligation reported on previous statement	nent of		
>			10/21/12	\$ 19.90
	Purpose: Website		Date	
	Purpose:	_		
	Purpose:	Click F	lere for Memo l	temization Type
	Check box if this expenditure is payn debt or obligation reported on previous statement		lere for Memo I	temization Type
	Check box if this expenditure is payn debt or obligation reported on previous statement		10/10/12	
	Check box if this expenditure is payn debt or obligation reported on previous			
	Check box if this expenditure is payn debt or obligation reported on previous statement	nent of	10/10/12 Date	
	Check box if this expenditure is payn debt or obligation reported on previous statement Purpose: envelopes Check box if this expenditure is payn debt or obligation reported on previous	nent of	10/10/12 Date	\$ <u>2.19</u>

Summary Page

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Plimus, Inc.		09/21/12	s 15.90
Address	Purpose: website	Date	
49016 Milmont Dr		Here for Memo	Itemization Type
Fremont, CA 94538			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #2	statement		
·	\times	10/21/12	
Name Plimus, Inc.	1	Date	\$ <u>19.90</u>
Address	Purpose: Website	Date	ŀ
49016 Milmont Dr	Click	Here for Memo	Itemization Type
Fremont, CA 94538	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name Clinton Twp. Postmaster		10/10/12	\$ 2.19
Address	Purpose: envelopes	Date	
Garfield, Clinton Twp., MI 48038	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
^{Name} Clinton Twp. Postmaster		10/11/12	
	stamps	Date	\$ 32.00
Address	Purpose: stamps		
Garfield, Clinton Twp., MI 48038	Click I	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	i	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name WAM Print		00/06/40	
	Purpose: mailer	09/06/12 Date	\$ <u>698.48</u>
Address	Purpose:		
5510 - 33rd SE Grand Rapids, MI 49512	l ——		Itemization Type
<u>'</u>	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement	· · · · · · · · · · · · · · · · · · ·	705
	Subto	otal this page	\$ 768.47 732.
	Grand Total of all (Complete on last pag		
		•	Enter this total on line 8a of

Page 1 of 4



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

0	1	3	6	8	O	2
~		~	v	v	v	_

1. Committee I. D. Number

2. Committee Name

CTE Kim Meltzer

	2. Compliance Harris		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Print Masters		09/10/12	\$ 345.35
Address	Purpose: printing lit	Date	
26039 Dequindre			
Madison Heights, MI 48071	Clic	k Here for Memo	Itemization Type
-	Check box if this expenditure is payment	of	
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
Expenditure #2			
Name Sawicki & Sons		09/13/12	\$ 1000.00
	oiano	Date	\$ <u>1000.00</u>
Address	Purpose: signs		
1521 W. Lafayette	Clia	de Llava for Marino	Itanianian Tuna
Detroit, MI 48216	Cit	k Here for Memo	itemization Type
Double, Wit How to	Check box if this expenditure is payment	of	
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
^{Name} Passport Pizza		09/18/12	a E0 00
	community event	Date	\$ 50.00
Address	Purpose: community event	Date	
41831 Garfield	Clic	k Here for Memo	Itemization Type
Clinton Twp., MI 48038	 		nomization Type
·	Check box if this expenditure is payment debt or obligation reported on previous	of	
Fund Raiser	statement		
Expenditure #4			
Name Clinton Twp. Goodfellows		00/40/40	
Chillion Twp. Goodienows		09/10/12	\$ 100.00
Address	Purpose: community event	Date	
P.O. Box 380643			
1.0. Box 000040	Clic	k Here for Memo	Itemization Type
Clinton Township, MI 48308	Check box if this expenditure is payment	of	
- 	debt or obligation reported on previous	וע	
Fund Raiser	statement		
Expenditure #5			
Name Office Depot		*****	
Office Depot		09/21/12	\$ 18. 5 4
Address	Purpose: office supply	Date	¥ <u>10.54</u>
44835 Schoenherr Road			
Sterling Heights, MI	l -	k Here for Memo	Itemization Type
	Check box if this expenditure is payment debt or obligation reported on previous	of	
Fund Raiser	statement		
	Sul	btotal this page	\$1,513.89
		!	Ψ1,010.00
	Grand Total of a (Complete on last pa	all Schedules 1B	
	(Complete on last ba	age or somedule)	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

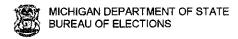
0136802

1. Committee I. D. Number

CANDIDATE COMMITTEE	2. Committee Name CTE Kim Meltzer		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name CTE David Pierce		09/24/12	\$ 100.00
Address 37822 Pocahontas Dr	Purpose: campaign donation	Date -	
Clinton Township, MI 48036-2184	CI	lick Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is paymen debt or obligation reported on previous	t of	
Expenditure #2	statement		
Name Sawicki & Sons		09/26/12	\$ 1120.00
Address	Purpose: signs	Date	
1521 W. Lafayette	CI	ick Here for Memo	Itemization Tune
Detroit, MI 48216	i		nemizadon rype
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	t of	
Expenditure #3			
Name Passport Pizza		10/05/12	\$ 51.13
Address	Purpose: community event	Date	♥ <u>J1.13</u>
41831 Garfield		-	
Clinton Twp., MI 48038	Cli	ck Here for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of .	
Expenditure #4	Statement		
Name Manhattan Mailers		10/11/12	- 0000 44
Address	Purpose: mailer	Date	\$ <u>3606.11</u>
51132 Milano Dr.			
Macomb MI 48042	i —	ck Here for Memo II	emization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #5			
Name Clinton Twp. Senior Center		10/11/12	
Address	Purpose: community event	Date	\$ <u>100.00</u>
40700 Romeo Plank Road			
Clinton Twp., MI 48038		ck Here for Memo II	emization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	ot	
	Su	btotal this page	\$4,977.23
	Grand Total of a (Complete on last pa	all Schedules 1B age of Schedule)	
	, ,		*****

Enter this total on line 8a of Summary Page

Page 3 of 4



SCHEDULE 1B CANDIDATE COMMITTEE

0136802

1. Committee I. D. Number	0100002	
2. Committee Name CTI	E Kim Meltzer	

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name USPS		10/11/12	\$ 32.00
Address	Purpose: stamps	Date	
Garfield, Clinton Twp., MI 48038		Hara for Mama	Itemization Type
,			nemzadon type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Print Masters		10/16/12	\$ 2607.60
Address	Purpose: print lit	Date	·
26039 Dequindre	Click	Here for Memo	Itemization Type
Madison Heights, MI 48071	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement	_	
Expenditure #3			
Name Huntington Bank		10/17/12	\$ 36.00
Address	_{Purpose:} bank fee	Date	
20650 Hall Rd	Click I	Here for Memo	Itemization Type
Clinton Twp., MI 48038	Check box if this expenditure is payment of		,,,,,
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			
Address	Purpose:	Date	\$
	Click !	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click	Here for Memo	Itemization Type
-	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement	·	
	Subte	otal this page	\$2,675.60

Grand Total of all Schedules 1B (Complete on last page of Schedule)

\$9,899.39

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDIII E 4E

1. Committee LD. Number _______00136802

OOUTDOLE IE	OTE VI	A d a Maria in		
THE THE PERSON NAMED IN TH	COmmittee Name CTE Kim	Weitzer	·····	
This Schedule itemizes:				
a ✓ Debts and obligations owed by or forgiven the corr (Che	mittee OR b. Deb ck either a or b. Use only for the p	ols and obligations owed <u>to</u> courses the course of the co	x forgiven <u>by</u> the co	ommittee,
3. Name and Malling Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9, Outstanding Balance at close of this period (item 6 minus item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: loan	3		
Kim Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038	5. Date Debt Was Incurred: 11/01/04 6. Original Amount of Debt:		\$	s 28785,79
	s 28785.79	<u> </u>	*	FORGIVEN
if bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred:	s	, chadaca, a	
	6. Original Amount of Debt \$	<u> </u>	s	\$FORGIVEN
if bank loan, name of endorser or guarantor:		A	Accord Wile decision is do	
Debt #3 Corp? Yes Owed to or by:	4. Type:	- \$ - \$	ount Endorsed: \$	
	6. Original Amount of Debt:	\$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
				\$28,785.79
(Con A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during th	nplete on last page of Schedule sh If there was an outstanding am e period covered by this Campa	want aurorists owed by ot.	o no consider	\$28,785.79 Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page



1. Committee L.D. Number 013680

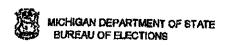
0136802

CANDIDATE COMMITTEE 2.0	Committee Name CIE KIM	Melizer		
This Schedule itemizes:			·	· · · · · · · · · · · · · · · · · · ·
a Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Deb	ts and obligations owed <u>to</u> o urpose checked.)	or forgiven by the co	mmittee.
Name and Malling Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was Incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (item 6 minus ftem 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: loan	\$		
Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	5. Date Deht Was Incurred: 04/11/12 6. Original Amount of Debt:	\$	\$	\$ 28815.74
Mhoek loon mass of and many a	\$ 29.95	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		Amk	unt Endorsed: \$	
Detxt #2 Corp? Yes Owed to or by:	4. Type: loan	\$	ÿ	
Kim Meltzer 20585 Leelanau Trail	5. Date Debi Was Incurred: 04/15/12	\$	1	
Clinton Twp MI 48038	6. Original Amount of Debt: \$ 10.17	 \$	\$	\$ 28825.91
	**************************************	\$		FORGIVEN
If bank toan, name of endorser or guarantor:		Am	ount Endorsed: \$_	,
Debt #3 Corp? Yes Owed to or by:	4. Type: loan	\$		
Kim Meltzer 20585 Leelanau Trail	5. Date Debt Was Incurred: 04/16/12	<u> </u>		
Clinton Twp MI 48038	6. Original Amount of Debt:	\$ \$	\$	\$ 29125.91
	\$_300.00			FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
		Page Subtotel	Outstanding debt)	\$29,125.91
(Co	implete on last page of Schedule sl	Grand Total o howing amounts owed by or	fali Schedules 1E to the committee)	
			٠	Enter this total on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

Page / or 5



1. Committee t.D. Number

CANDIDATE COMMITTEE 2.	Committee Name CTE KIM	Meltzer		·
This Schedule itemizes:				
	nmilities OR b. Debeck either a or b. Use only for the p	ots and obligations owed to o	or forgiven by the co	anmilies,
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: loan			
Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	5. Date Debt Was Incurred: 04/18/12 6. Original Amount of Debt: \$ 250.00	s	\$	\$ 29375,91 FORGIVEN
If bank loan, name of endorser or guarantor:		- S Amo	unt Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: loan	\$	unt choosed, \$	
Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	5. Date Dobt War Insurred: 04/22/12 6. Original Amount of Debt	<u> </u>		4 29391,81
Miles de deservation de la constant	s 15.90	\$\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ame Ame	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: Kim Meltzer	4. Type: loan	\$		
20585 Leelanau Trail Clinton Twp MI 48038	5. Data Debt Was Incurred: 04/24/12 6. Original Amount of Debt: \$ 300.00	<u>s</u> s	\$	\$ 29691.81 FORGIVEN
if bank loan, name of endorser or guarantor:		Amk	ount Endorsed: \$	
——————————————————————————————————————			Outstanding debt)	\$29,691.81
(Co	mplete on last page of Schedule si	Grand Total of nowing amounts owed by or	all Schedules 1E to the committee)	Enter this total

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS

Page 3 of 5

1. Committee LD. Number

0136802

SCHEDULE 1E	OTE 1/1-	8.4.4		
CANDIDATE COMMITTEE 2.	Committee Name CTE Kim	Meltzer		
This Schedule Itemizes:				
a Debts and obligations owed by or forgiven the cor (Ch	mmittee OR b. Del sck either a or b, Use only for the p	tis and obligations owed <u>to</u> c surpose checked.)	or forgiven <u>by</u> the or	ommittee.
Name and Mailing Address of person, vandor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank ican, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (item 6 minus item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: loan			
Kim Meltzer	1		,	
20585 Leelanau Trail	5. Date Debt Was Incurred:			
Clinton Twp MI 48038	04/25/12	<u> </u>		29696,61
	6. Original Amount of Debt:	.	\$	\$ 20000,01
,	s 5.00			FORGIVEN
If bank loan, name of endorser or guaranton	•	<u></u>		
Debt #2 Corp? Yes Owed to or by:	4. Type: loan	s Arno	unt Endorsed: \$ _	
Kim Meitzer	5. Data Debt Was Incurred:		74	
20585 Leelanau Trail	05/01/12	\$	· 	
Clinton Twp MI 48038	B, Original Amount of Debt:	<u> </u>		s 29946.81
	\$ 250.00	<u> </u>	5	
	T	\$		FORGIVEN
If bank loan, name of endotset or guarantor:			armak Prostono o dom	
Debt #3 Corp? Yes Owed to or by:	4. Type: loan	2	ount Endorsed: \$	
Kim Meltzer	5. Date Debt Was Incurred:			
20585 Leelanau Trail	05/21/12			
Clinton Twp MI 48038	6. Original Amount of Debt:			s 29962.71
	\$ 15.90 ·	\$.	· 1	
		<u>\$</u> _		FORGIVEN
if bank loan, name of endorser or guarantor,		Arno	ount Endorsed; \$ _	
		والمائلة المستحدة المستحدة المستحددة المستحددة المستحددة المستحددة المستحددة المستحددة المستحددة المستحددة المستحددة		000 000 54
		Page Subtotal ((Outstanding debt)	\$29,962.71
(Cor	mplete on last page of Schedule sh	Grand Total of	all Schedules 1E	
A debt or obligation must be shown on this Schoduke this Campaign Statement or it was forgiven during th	If there were an autofording		ing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



1. Committee J.D. Number 0136802

AT THE COMMENT ! IEE	Committee Name CIE KIM	Menzer		
This Schedule Itemizes:				
a Debts and obligations owed by or forgiven the col	mmittee OR b. Del ack either a or b. Use only for the p	our obligations owed to	or forgiven <u>by</u> the co	ommittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumufative payment to date on debt	9. Outstanding Balance at closs of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Kim Meltzer	4. Type: loan 5. Date Debt Was Incurred:			
20585 Leelanau Trail Clinton Twp MI 48038	06/13/12 6. Original Amount of Debt:	\$	\$	\$_29964.21
If bank loan, name of endorser or guarantor;	•		ount Endorsed; \$	•
Corp? Yes Owed to or by: Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 08/20/12 6. Original Amount of Debt \$ 26.44	\$	*	\$ 29990.65 FORGIVEN
If bank loan, name of endorser or guarantor.				
Debt#3 Corp? Yee Owed to or by: Kim Meltzer 20585 Leelanau Treil Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incarred: 06/21/12 6. Original Amount of Debt:	\$	ounf Endorsed: \$	s 30006.55
If bank loan, name of endorser or guarantor.	\$_15.90 ·		ount Endorsed; \$	FORGIVEN
(Cor	mplete on last page of Schedule sh	Page Subtotal (Outstanding debt)	\$30,006.55
A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during th	a 16 thouse same me and the office		sing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

Page 4 of 5



1. Committee I.D. Number

0136802

OOMEDONE IE	CTE Vim	k d n ld m n =		
CANDIDATE COMMITTEE 2.0	Committee Name CTE Kim	Mettzer		
.This Schedule Itemizes:				
a Debts and obligations owedby or longiven the con (Che	nmittee OR b. Deb	ots and obligations owed to course checked.)	or forgiven <u>by</u> the co	mmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank toan, please provide information regarding the endorsers or quarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was Incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
Debt #1 . Corp? Yes Owed to or by:	4. Type: loan	s		
Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	5. Date Debt Was Incurred: 06/06/12	s		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6. Original Amount of Debt: \$ 14.37	\$	\$	\$ 30020.92 FORGIVEN
If bank loan, name of endorser or guarantor.		\$		I CHOIVEN
Debt #2 Corp? Yes		Amo	unt Endorsed: \$	
Owed to or by:	4. Type: loan	,	್ಷ.	
Kim Meltzer	5. Date Debt Was Incurred:		Ĵ	
20585 Leelanau Trail	07/06/12			
Clinton Twp MI 48038	6. Original Amount of Debt		æ	s 30054.58
	ş 33.66		*	· · · · · · · · · · · · · · · · · · ·
If hants look name of and an account		\$.	i	FORGIVEN
If bank loan, name of endorser or guarantor. Debt #3 Core? Ves		Amo	unt Endorsed: \$	
Owed to or by:	4. Type: loan	\$		
Kim Meltzer	5. Date Debt Was Incurred:	\$]	
20585 Leelanau Trail	07/21/12			
Clinton Twp MI 48038	6. Original Amount of Debt		_	\$ 30070.48
·	s 15.90	\$	<u>э</u>	PRICE
	V			FORGIVEN
if bank loan, name of endorser or guarantor:		Amo	ount Endorsed; \$	
		Page Sublotal (0	Outstanding debt)	\$30,070.48
A debt or obligation must be shown on this Schedule	npiete on last page of Schedule sh	count manufacture owed by or		\$30,070.48 Enter this total on line 12a "owed by" or line 12b
this Campaign Statement or it was forgiven during th	e period covered by this Campa	ign Statement.		"owed to" of the Summary Page

Page 5 of 5



1. Committee I.D. Number

0136802

CTE Kim Meltzer

CANDIDATE COMMITTEE 2.C	ommittee Name CIE KIM	Weitzer		-	
This Schedule itemizes:					
a Debts and obligations owed <u>by</u> or forgiven the com (Chec	mittee OR b. Debt	s and obligations owed <u>to</u> or irpose checked.)	forgiven by the cor	nmittee.	
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by:	4. Type: loan	\$			
Kim Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038	5. <u>Date Debt Was Incurred</u> :	\$ 	\$	\$FORGIVEN	
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$		
Debt #2 Corp? Yes Owed to or by:	4. Type: in-kind loan	\$			
Plimus, Inc. 49016 Milmont Dr. Fremont, CA 94538	5. Date Debt Was Incurred: 09/21/2012 6. Original Amount of Debt: \$ 15.90	\$ \$ \$	\$	\$FORGIVEN	
		\$			
If bank loan, name of endorser or guarantor: Amount Endorsed: \$_					
Debt #3 Corp? Yes Owed to or by:	4. Type: in-kind loan	<u> </u>			
Plimus, Inc.	5. Date Debt Was Incurred:	<u> </u>			
49016 Milmont Dr. Fremont, CA 94538	6. Original Amount of Debt:	<u> </u>	•	.	
	\$ 19.90	\$, Φ	FORGIVEN	
		\$	0	onesiteit	
if bank loan, name of endorser or guarantor: Amount Endorsed: \$					
		Page Subtotal	(Outstanding debt)	\$1,035.80	
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)					
A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.					

Page _____ of ____